CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

FILE PRACTICES COMMISSION

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BOARD OF SUPERVISORS SAN FRANCISCO

Agency Name San Francisco Board of Supervisors Division, Board, Department, District, if applicable If filing for multiple positions, list below or on an attachment. Agency: Position: Judge or Court Commissioner (Statewide Jurisdiction) Multi-County City of San Francisco Other 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through December 31, 2011. The period covered is	NAME OF FILER S. ALASTI H. A. N. C. I. S. C. M. M. S. C. M. M. S.	Michael By PN
San Francisco Board of Supervisors Division, Board, Department, District, if applicable Supervisor ▶ If filing for multiple positions, list below or on an attachment. Agency:		
Division, Board, Department, District, if applicable Supervisor ▶ If filing for multiple positions, list below or on an attachment. Agency:	Agency Name	
Supervisor If filing for multiple positions, list below or on an attachment. Agency:	San Francisco Board of Supervisors	
Position: Agency:	Division, Board, Department, District, if applicable	Your Position
Agency:		Supervisor
2. Jurisdiction of Office (Check at least one box) State Multi-County City of San Francisco Other 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through December 31, 2011. Or- The period covered is	▶ If filing for multiple positions, list below or on an attachment.	
Multi-County San Francisco County of San Francisco Other	Agency:	Position:
Multi-County San Francisco County of San Francisco Other	2. Jurisdiction of Office (Check at least one box)	
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3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through December 31, 2011. -or- The period covered is/, through December 31, 2011. Assuming Office: Date assumed/, through December 31, 2011. Assuming Office: Date assumed/, through December 31, 2011. Assuming Office: Date assumed/, through December 31, 2011. The period covered is/, through December 31, 2011. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving office. The period covered is January 1, 2011, through the date of leaving off	— □ Multi-County	-
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Annual: The period covered is January 1, 2011, through December 31, 2011. The period covered is	City of	_ Other
-or- The period covered is	3. Type of Statement (Check at least one box)	
The period covered is	_ ,	
Assuming Office: Date assumed	-or- The period covered is, th	nrough O The period covered is January 1, 2011, through the date of
Candidate: Election Year Office sought, if different than Part 1:		
Check applicable schedules or "None." ☐ Schedule A-1 - Investments — schedule attached ☐ Schedule A-2 - Investments — schedule attached ☐ Schedule B - Real Property — schedule attached ☐ Schedule E - Income — Gifts — schedule attached ☐ Schedule E - Income — Gifts — Travel Payments — schedule attached ☐ Ort	Candidate: Election Year Office soug	ght, if different than Part 1:
□ Schedule A-1 - Investments - schedule attached □ Schedule A-2 - Investments - schedule attached □ Schedule B - Real Property - schedule attached □ Schedule E - Income - Gifts - Travel Payments - schedule attached □ Schedule E - Income - Gifts - Travel Payments - schedule attached □ Schedule E - Income - Gifts - Travel Payments - schedule attached	4. Schedule Summary	
Schedule A-2 · Investments - schedule attached Schedule B · Real Property - schedule attached Schedule E · Income - Gifts - schedule attached Schedule E · Income - Gifts - Travel Payments - schedule attached	Check applicable schedules or "None."	► Total number of pages including this cover page:1
Schedule A-2 - Investments - schedule attached □ Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached □ Schedule E - Income - Gifts - Travel Payments - schedule attached	Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
-or-	Schedule A-2 - Investments - schedule attached	<u> </u>
**	Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
Motte - 140 reportable interests out any solicular	**	ala interesta an anu cabadula
	Notice - two reportan	He interests on any scriedule
	I certify under penalty of perjury under the laws of the State of	California th
certify under penalty of perjury under the laws of the State of California the	Date Signed February 10, 2012	Signatu
Date Signed February 10, 2012 Signatu	ітопи, чәу, усы ј	
Fobruary 10, 2012		FPPC Null-Free Helpline: 866/275-3772 www.tppc.ca.gov

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

FISTATEMENT OF ECONOMIC INTERESTS

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MAR -5 PM 2:58 COVER PAGE

RECEIVED BOARD OF SUPERVISORS SAN FRANCISCO

NAME OF FILER AVAILAGE ETHIS COMMISS	
1. Office, Agency, or County	BYPN
Agency Name	
San Francisco Transportation Authority	
Division, Board, Department, District, if applicable	Your Position
<u> </u>	Commissioner
▶ If filing for multiple positions, list below or on an attachment	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	
City of SAN FRANCISCO	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2011, through December 31, 2011.	Leaving Office: Date Left/
The period covered is/	, through O The period covered is January 1, 2011, through the date of leaving office.
Assuming Office: Date assumed	The period covered is
Candidate: Election Year Office	sought, if different than Part 1;
4. Schedule Summary	
Check applicable schedules or "None."	► Total number of pages including this cover page:1
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income – Gifts – schedule attached
Schedule B - Real Property - schedule attached	☐ Schedule E - Income - Gifts - Travel Payments - schedule attached
	or- ortable interests on any schedule
5. Verification	
(c)(1)	
I have used all reasonable diligence in preparing this statement, herein and in any attached schedules is true and complete. I a	I have reviewed this statement and to the best of my knowledge the information contained
I certify under penalty of perjury under the laws of the Stat	(a)(1)
Date Signed February 10, 2012 (month, day, year)	Signature

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

PAGE

Date Received
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BOARD OF SUPERVISORS
SAN FRANCISCO

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Avalos, Janes Comisso	(elect) cotte (The winderful it:
1. Office, Agency, or Court BYAgency Name LOCAL AGENCY FORMATION	COMMISSION MANGER
Division, Board, Department, District, if applicable	Your Position Director
▶ If filling for multiple positions, list below or on an attachment.	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State ☑ Multi-County	☐ Judge or Court Commissioner (Statewide Jurisdiction) ☑ County of SAN FRANCISCO
Sity of SAN FRANCISCO	Other
3. Type of Statement (Check at least one box)	**************************************
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Check applicable schedules or "None." ► Total nu	mber of pages including this cover page:1
Schedule A-2 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attache Schedule D - Income – Gifts – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached
-or-	
None - No reportable interests of	on any schedule
5. Verification	
(e)(1)	
I have used all reasonable diligence in preparing this statement. I have reviewed herein and in any attached schedules is true and complete. I acknowledge this	
I certify under penalty of perjury under the laws of the State of California the	
Date Signed 2/10/12 Signat	ture